

Corporate Compliance Report

Audit & Compliance Committee of the Board of Directors

June 20, 2019



COOK COUNTY
HEALTH

Meeting Objectives

Review

Metrics

- Cook County Health as a Provider of Health Care Services
- CountyCare Medicaid Health Plan

Work Plan Activity

Action

Review and Approvals

- Code of Ethics (Review Only)
- Audit & Compliance Committee Charter
- Corporate Compliance Governance Reporting
- Corporate Compliance Hot Line Charter

Metrics

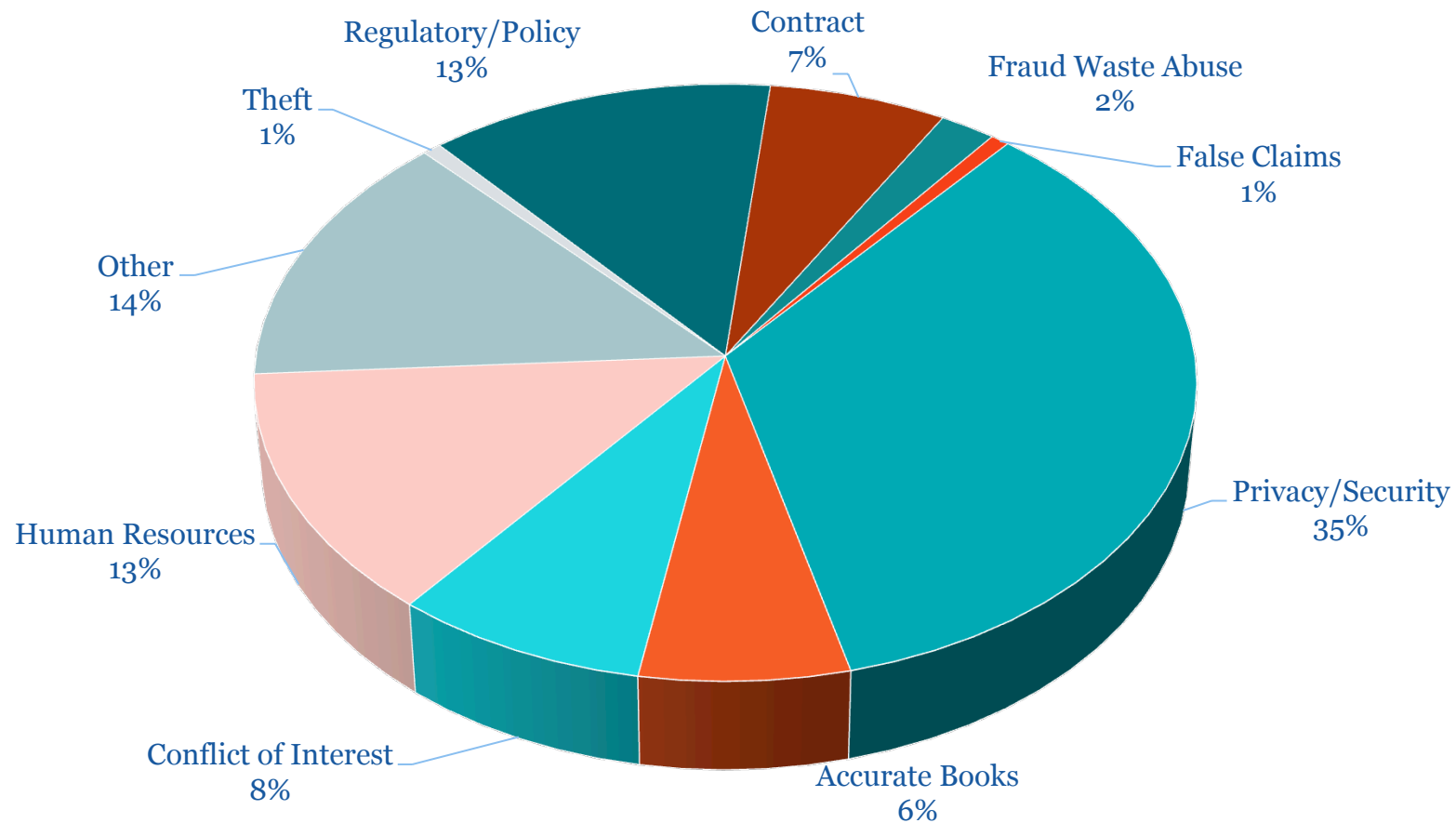
Cook County Health as a Provider of Care
CountyCare Medicaid Health Plan



COOK COUNTY
HEALTH

F-YTD 2019 Contacts by Category

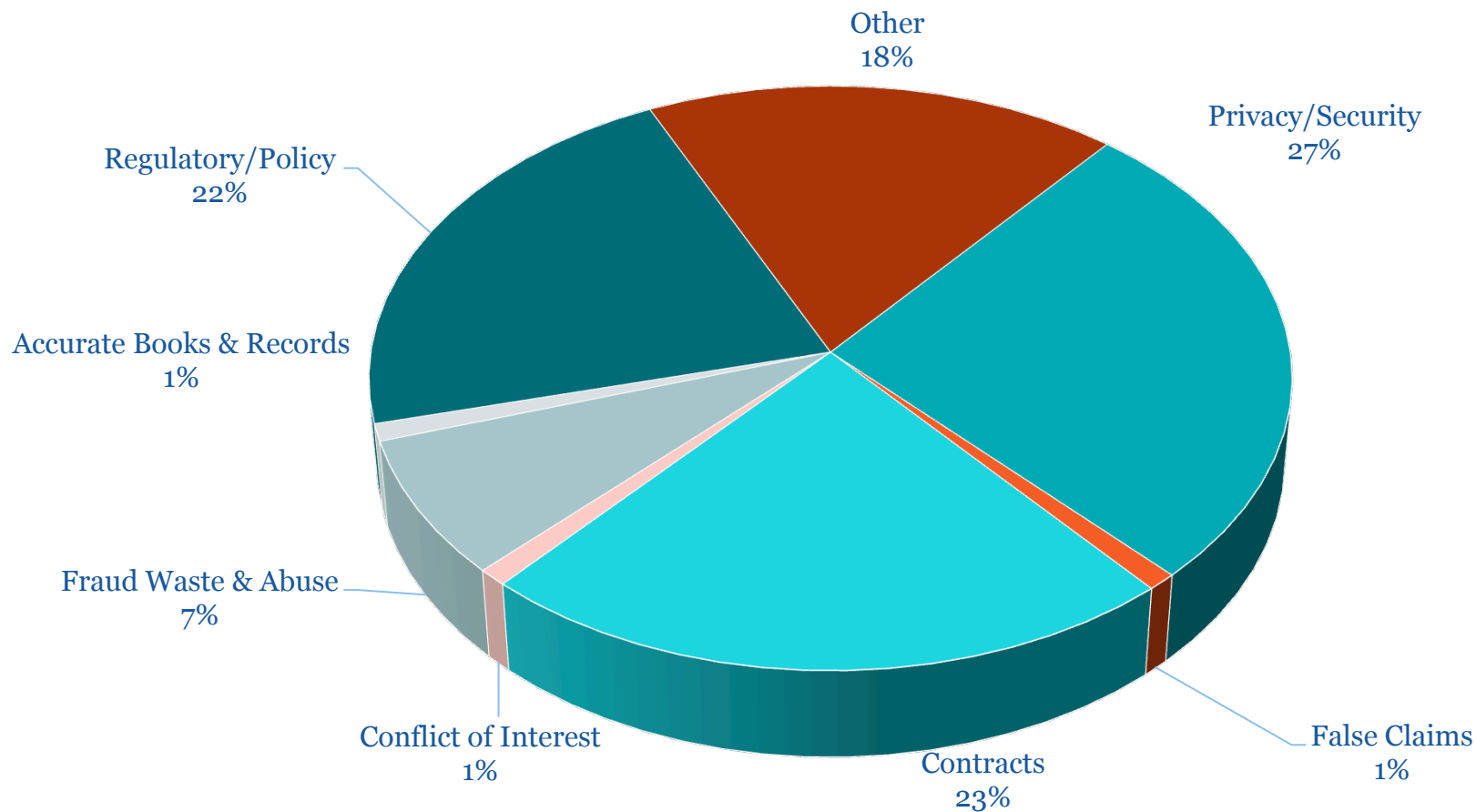
CCH as a Provider of Care



Categories	
Privacy/Security (HIPAA)	100
Human Resources	38
Regulatory/Policy	37
Conflict of Interest	23
Contracts	19
Accurate Books	19
Fraud Waste & Abuse	6
False Claims	2
Theft	2
Other	40
	286

F-YTD 2019 Contacts by Category

CountyCare Health Plan

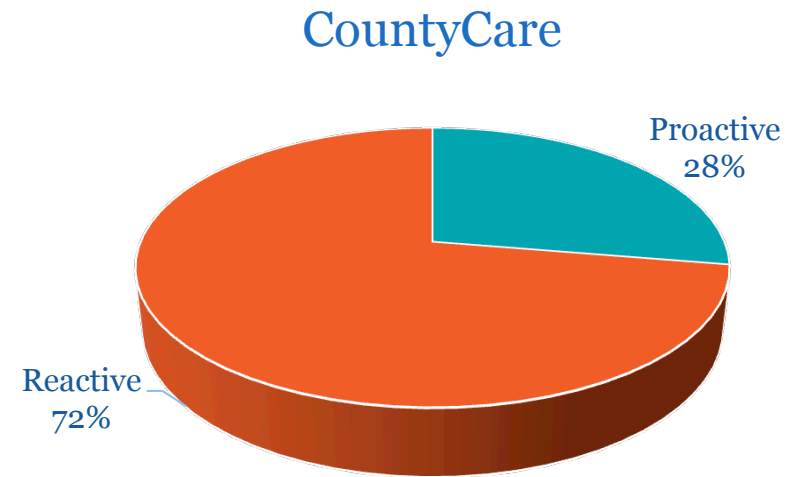
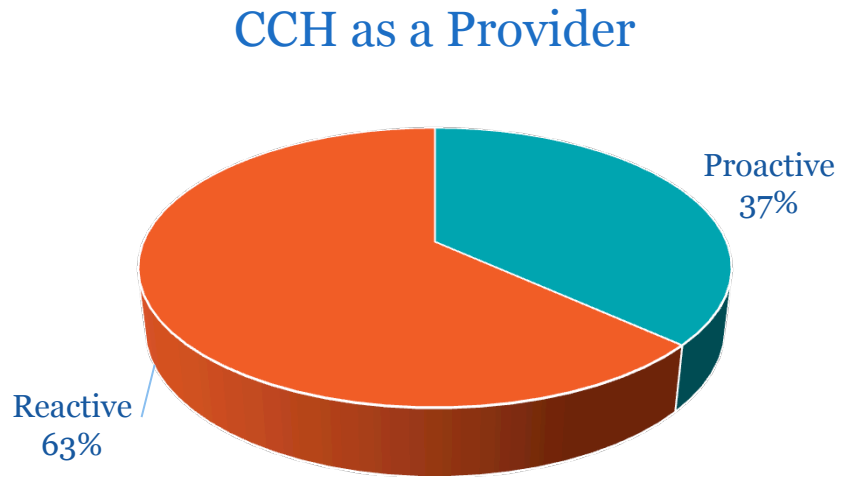


Categories	
Privacy/Security (HIPAA)	28
Contracts	24
Regulatory/Policy	23
Fraud Waste & Abuse	8
Accurate Books & Records	1
Conflict of Interest	1
False Claims	1
Other	19
	105



F-YTD 2019 Proactive vs. Reactive Contact Activity

- Reactive activities are unanticipated contacts, queries, or concerns.
- Proactive activities anticipate possible issues.



While proactive activity is optimal, reactive activity is not viewed negatively by Corporate Compliance. A majority of reactive contacts indicate awareness of the Compliance Program as an organizational resource.

Work Plan Activity - System

Additional projects

- Transitioning and building Compliance Tracking Tool
- Monitoring sanction/exclusion screenings (Employee and Vendor)
- Determining compliance requirements as a First Tier Downstream Entities
- Safeguarding Protected Health Information
 - Providing compliance and privacy refresher training to departments as needed
 - Partnering with HIS to evaluate compliance concerns with issues such as texting and patient portal availability for minors.
 - Creating templates for HIPAA authorizations and provide guidance to healthcare providers on obtaining an authorization prior to any publication
 - Developing offshore questionnaires for vendors
- Participating in local and national compliance workgroups

Work Plan Activity - CountyCare

Additional accomplishments

- Directing Fraud, Waste, Abuse, and Financial Misconduct Activities with Delegated Vendors
 - Providing guidance to CountyCare in transition to new PBM (MedImpact)
- Monitoring the health plan/insurance environment
 - Meeting regularly Illinois Association of Medicaid Health Plans (IAMHP) and the National Insurance Crime Bureau (NCIB)
 - Collaborating with other Medicaid Health Plan Special Investigation Units (SIU) locally and nationally with the Healthcare Fraud Prevention Partnership (HFPP)
 - Meeting/reporting quarterly with Healthcare Family Services (HFS), HFS Office of Inspector General, Medicaid Fraud Control Unit, and the Attorney General
- Transferring Grievances, Appeals, and State Fair Hearings to Clinical Services/Quality
- Disseminating annual compliance attestations for CountyCare Delegated Vendors
 - Incorporating offshore questions to vendors



Action Needed

Review and Approvals



COOK COUNTY
HEALTH

Code of Ethics

Summary

- Establishes a foundation for actions and decisions made by CCH
- Provides basic guidance to meet professional standards and compliance with all applicable laws and regulations

Action

- Receive and File



COOK COUNTY
HEALTH

CODE OF ETHICS

The Cook County Health's Code of Ethics outlines our expectations of everyone within Cook County Health (CCH), whether you are a part of the health and hospitals side of the system or part of the insurance plan. This applies to all CCH personnel, whether you are employed by the CCH or if you represent CCH in any way, this includes ~~but is not limited to~~ Board-delegated authority, volunteers, students, independent contractors, consultants, and other business partners (vendors) who are not employees but are working at CCH.

We will conduct ALL our interactions respectfully, responsibly, honestly, professionally, and in compliance with laws, regulations, and policies of the organization.

All personnel are expected to uphold honest and ethical behavior, comply with laws, regulations, and system policies, and to fulfill their responsibilities as important members of the CCH organization. CCH management also has a duty to conduct business with integrity, to act responsibly and to be accountable for their decisions and actions made on behalf of CCH. Management is also expected to provide an environment where personnel can feel comfortable raising concerns and reporting actual or potential instances of wrongdoing without the fear of retaliation.

Compliance with the Code of Ethics is required.

Failure to comply with the standards established and outlined by this Code of Ethics or to cooperate with CCH leadership regarding activities related to this Code may subject individuals to disciplinary action up to and including discharge of employment or termination of the written contract. Personnel who violate certain principles outlined in this Code may also be subject to fines and penalties imposed by the county, state and Federal government.

CCH Corporate Compliance is responsible for the final interpretation of this Code and will decide necessity for reviews and revisions.

This Code outlines the culture and principles that are expected from EVERYONE.

A. QUALITY OF CARE

We will,

- Treat each patient and plan member with dignity, courtesy and respect. We make no distinction in the availability of services; the admission, transfer or discharge of patients; or in the care we provide based on age, gender, disability, race, color, religion, national origin, or any other characteristic protected by law.
- Provide a safe environment staffed by skilled and compassionate health care professionals who uphold standards of professional practice throughout all our facilities and programs.
- Promote the delivery of the highest quality of care that is both necessary and appropriate, within our capabilities and capacity, to patients and health plan members.



COOK COUNTY
HEALTH


Audit & Compliance Committee Charter

Summary

- Outlines delegated oversight responsibilities
- Ensures policies and procedures have been implemented to support compliance with applicable laws and regulations.

Action

- Request for Approval

 COOK COUNTY HEALTH		Category: GOVERNANCE	
Subject: CORPORATE COMPLIANCE		Page 1 of 4	Policy #: CC.
Title: AUDIT & COMPLIANCE COMMITTEE OF THE BOARD OF DIRECTORS CHARTER		Approval Date:	Posting Date:

This document sets forth the duties and responsibilities, and governs the operations of the Audit & Compliance Committee of the Board of Directors of Cook County Health (CCH).

PURPOSE

CCH Chief Executive Officer (CEO) and the Board of Directors (Board) are committed to the proper oversight of our Audit and Compliance programs. In furtherance of this objective, the Board initiated an Audit and Compliance Committee (Committee)¹ composed of independent directors.

The purpose of the Committee is to provide oversight to the CCH internal audit and corporate compliance programs and monitor that systems are in place to ensure the quality of information used by the Board of CCH or by external agencies to evaluate the fiscal affairs and regulatory compliance. Additionally, the Audit and Compliance Committee will provide oversight to ensure the Board of Directors and management of CCH establishes a culture based on honesty and integrity.

The Committee shall advise the Board in matters relating to:


Corporate Compliance Governance Reporting

Summary

- Provides a framework for reporting Corporate Compliance Program activities to the Board of Directors through the Audit & Compliance Committee and Chief Executive Officer
- Establishes formal reporting requirements through written reports and meeting minutes

Action

- Request for Approval

 COOK COUNTY HEALTH		Category: GOVERNANCE	
Subject: CORPORATE COMPLIANCE		Page 1 of 3	Policy #: CC.
Title: CORPORATE COMPLIANCE REPORTING TO THE GOVERNANCE AUTHORITIES OF CCH		Approval Date:	Posting Date:

PURPOSE
Cook County Health (collectively, "CCH") is committed to high ethical and moral standards, as well as ethical and legal business conduct at all levels of the organization. The Office of Corporate Compliance functions to prevent and detect violations of applicable laws and regulations. Therefore, it is the policy of CCH to have in place a system for reporting Corporate Compliance activities to the CCH Board of Directors (Board) through the Audit & Compliance Committee and the CCH Chief Executive Officer (CEO).

AFFECTED AREAS
This policy applies to the Office of Corporate Compliance, CCH Board of Directors, and the CCH CEO.

POLICY
A. The Board has an obligation with respect to the duty of care, which arises in two distinct contexts:

1. The decision-making function – application of duty of care principles to a specific decision made by the Board or action performed by the Board; and
2. The oversight function – application of the duty of care principles in relation to the Board's general activity with respect to business operations (e.g. exercising reasonable care to assure that CCH senior leadership carry out their management responsibilities and comply with the law).


Corporate Compliance Hot Line Charter

Summary

- Supports effective lines of communication, an essential element of a compliance program
- Provides a confidential mechanism for workforce members to report concerns and allows reporters to remain anonymous
- Compels the Corporate Compliance Program to promptly and properly address and resolve compliance concerns brought to their attention

Action

- Request for Approval

 COOK COUNTY HEALTH		Category: CCH SYSTEM WIDE	
Subject: COMPLIANCE PROGRAM HOT LINE		Page 1 of 2	Policy #: CC.
Title: COMPLIANCE PROGRAM HOT LINE CHARTER		Approval Date:	Posting Date:

PURPOSE

A primary function of the Corporate Compliance Program is to ensure that workforce members have an outlet to report problems and concerns if other processes are ineffective or inappropriate. The Corporate Compliance Hot Line is one mechanism to allow workforce members to report concerns confidentially, reporters may remain anonymous, thereby avoiding potential retaliation.

To support effective lines of communication, a hot line should be available to all workforce members 24/7 with both telephonic and electronic access; information about accessing the hot line should be conspicuously posted.

Matters reported through the hot line or other communication sources that suggest substantial violations of compliance policies, regulations, or statutes should be documented and investigated promptly to determine their veracity.

Cook County Health (CCH) has established and will maintain a Corporate Compliance Hot line function that meets the following terms:

- The Chief Compliance & Privacy Officer or designee is charged with ensuring that all issues reported to the Corporate Compliance Hot Line via telephone calls, via the online reporting method, or via other communication methods shall be acted upon in a timely fashion as required by CCH policies and procedures.
- All those who contact the hot line operation shall be assured anonymity, or in the case where the contact identifies themselves, confidentiality.

Questions?



COOK COUNTY
HEALTH